



PATIENT

Rogue Dembowski

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

2015

WEIGHT

9.5 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert IVUSS

**IMAGING
PERFORMED BY**

Denise Bruno, LVT,
RDMS

HOSPITAL NAME

Brooklyn Heights VH

REFERRING VET

Dr. Thomson

INVOICE

92679

DATE

10/26/21

PRESENTING CLINICAL SIGNS

History: Multicentric lymphoma

Evaluate for metastasis to abdomen

Labs attached

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. Small calculi were noted in the bladder/urethra. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 3.78 cm. The left kidney measured 3.6 cm.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 0.56 cm at the cranial pole and 0.42 cm at the caudal pole. The left adrenal gland measured 1.84 x 0.53 cm at the caudal pole and 0.43 cm at the cranial pole.

Spleen

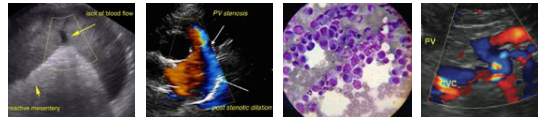
The **spleen** revealed micronodular changes with swollen, slight irregular contour.

Liver

The **liver** revealed slight coarse architecture. The gallbladder was mildly over distended with suspended and dependent debris, yet not to the level of emerging mucocele. However, the sludge appears to be mildly excessive. No adjunctive inflammation was noted. The hepatic lymph nodes are enlarged, hypoechoic and rounded measuring up to 1.0 cm.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.



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Pancreas

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The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

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ULTRASONOGRAPHIC FINDINGS

BREED

Small bladder calculus.

Mixed

Renal calculi.

SEX

Hepatic lymphadenopathy.

Spayed Female

Micronodular splenic changes.

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

2015

The patient is likely passing calculi periodically. Given the hepatic lymphadenopathy along with the splenic presentation this is most consistent with an early infiltrative process. Oncological review is recommended. The majority of the organs are unremarkable; however, the spleen and hepatic lymph nodes suggest an early infiltrative pattern.

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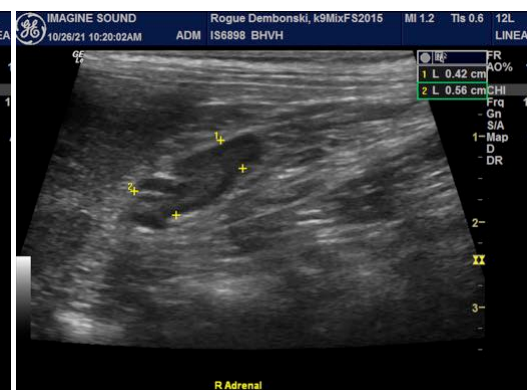
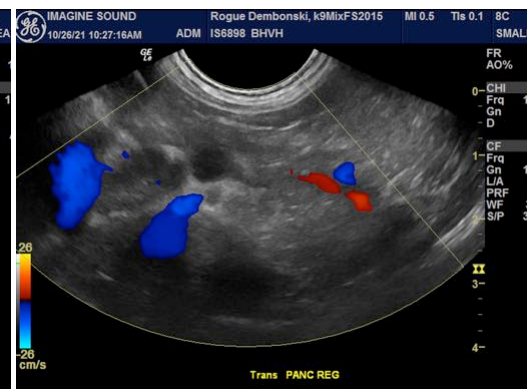
Dr. Thomson

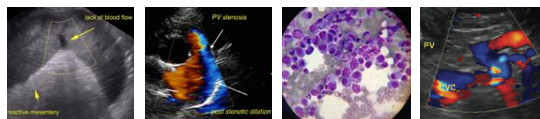
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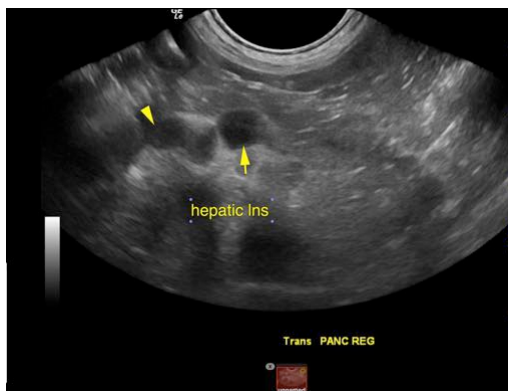
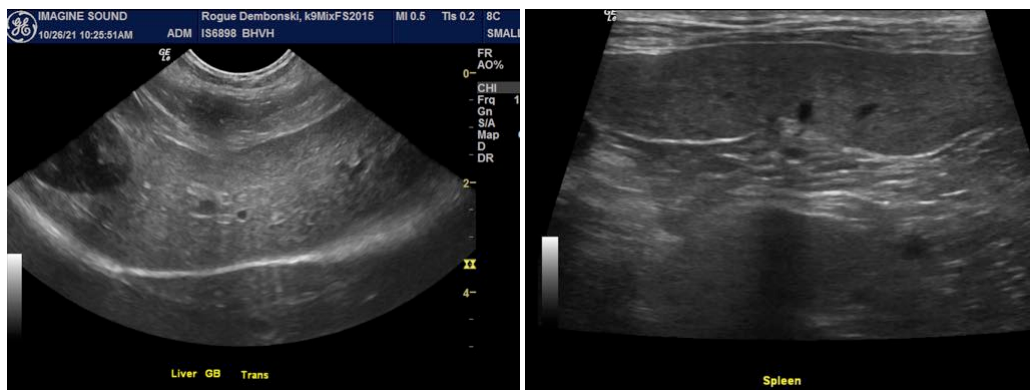
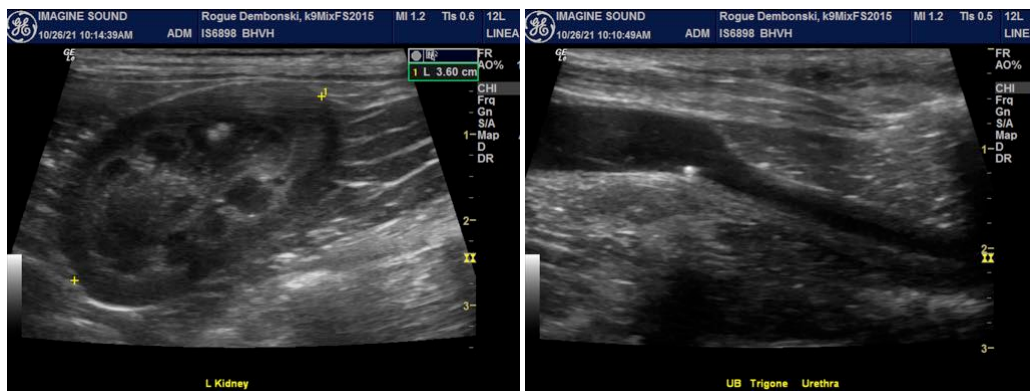
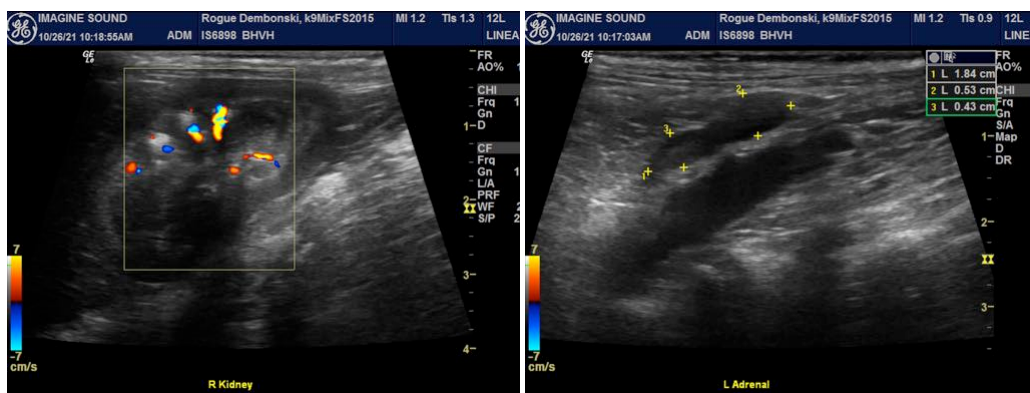
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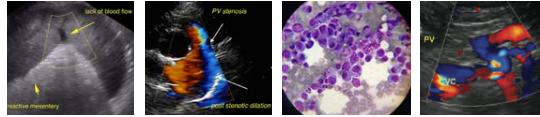
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the



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image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

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Eric.Lindquist@SonoPath.com

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